Image# 15951081857 PAGE 1 / 14

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) JEFF PAC ADDRESS (number and street) Chack if different than previously reported. (ACC) Chock if different than previously reported. (ACC) Chock of different than previously reported. (ACC) Chock of different than previously reported. (ACC) CC 2. FEC IDENTIFICATION NUMBER V CITY A STATE A ZIP CODE A CITY A STATE A ZIP CODE A AMENDED REPORT (N) OR X AMENDED AME ON (A) 4. TYPE OF REPORT (bonder) (c) Monthly Feb 20 (M2) May 20 (M5) Aug 20 (M8) Pec 20 (M10) Due On: Mar 20 (M4) Jul 20 (M7) Oci 20 (M10) Jun 31 (YE) Quarterly Report (21) July 15 Quarterly Report (22) Quarterly Report (23) January 31 Quarterly Report (C2) Quarterly Report (C3) January 31 Verification on Verification Number (d) 30-Day PRE Election on Report (TER) Report for the: Election on Figure (30S) Special (30S) Report for the: Election on Figure (30S) Report for the: Example (40S) Report for the: Example (40S) Report for the: Example (40S) Report for				Office Use Only
ADDRESS (number and street) Check if different than previously reported. (ACC) SACRAMENTO C CO0489112 SACRAMENTO C CO0489112 SACRAMENTO SACRAMENTO C CO0489112 SACRAMENTO SACRAMENTO SACRAMENTO C CITY A STATE A ZIP CODE A C CO0489112 SACRAMENTO		YPE OR PRINT ▼		12FE4M5
Check if different than previously reported. (ACC) SACRAMENTO Check if different than previously reported. (ACC) SACRAMENTO CA 95833 PEC IDENTIFICATION NUMBER V CITY A STATE A ZIP CODE A 3. IS THIS NEW (A) AMENDED (A) 4. TYPE OF REPORT (Choose One) (B) Counterly Reports: April 15 Cuarterly Report (Q1) July 15 Cuarterly Report (Q1) July 15 Cuarterly Report (Q2) Cotober 15 Cuarterly Report (Q2) Cotober 15 Cuarterly Report (Non-election Year Only) (MY) Termination Report (TER) Termination Report (TER) Termination Report (TER) Covering Period 10 10 16 2014 Through Title Currically Filed) Date O3 Zand Bauer David Bauer IElectronically Filed) Date O3 Zand Bauer David Bauer David Bauer IElectronically Filed) Date OA MANDED AMENDED AM	JEFF PAC			
Check if different than previously reported. (ACC) SACRAMENTO SACRAMENTO SACRAMENTO CA 95833 PEC IDENTIFICATION NUMBER V CITY STATE ZIP CODE 3. IS THIS REPORT (N) OR X AMENDED (A) TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Cotober 15 Quarterly Report (Q2) Dec 20 (M42) Dec 20 (M4) Dec 20 (M4) Dec 20 (M10) Dec 20 (M110) Dec 20 (M				
Check if different than previously reported. (ACC) SACRAMENTO SACRAMENTO SACRAMENTO CA 95833 PEC IDENTIFICATION NUMBER V CITY STATE ZIP CODE 3. IS THIS REPORT (N) OR X AMENDED (A) TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Cotober 15 Quarterly Report (Q2) Dec 20 (M42) Dec 20 (M4) Dec 20 (M4) Dec 20 (M10) Dec 20 (M110) Dec 20 (M				
than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER V C C C00489112 3. IS THIS REPORT (N) OR X AMENDED (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Report (C1) July 15 Quarterly Report (O2) October 15 Quarterly Report (O2) October 15 Quarterly Report (O2) Dute for the: Quarterly Report (O2) Dute for the: C C C00489112 (b) Monthly Report (Mar 20 (M3) Jul 20 (M6) Aug 20 (M8) Nov 20 (M1) Nov Election (Mar 20 (M3) Jul 20 (M6) Sep 20 (M9) Dec 20 (M12) (Nen Election (Mar 20 (M3) Jul 20 (M7) Cot 20 (M10) Jan 31 (YE) (c) 12-Day Primary (12P) General (12G) Runoff (12R) PRE-Election Report for the: Convention (12C) Special (12S) Use of the following the fo	ADDRESS (number and street)	2150 RIVER PLAZA DR. #1	50	
2. FEC IDENTIFICATION NUMBER V C C C00489112 3. IS THIS NEW REPORT (N) OR X AMENDED (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (Q3) January 31 Year-End Report (Q3) Fear Conly) (MY) Termination Report (CTER) Termination Report (CTER) Termination Report	Check if different			
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Cotober 15 Quarterly Report (YE) July 31 Mid-Year Report (Non-election Year Chily) (MY) Termination Report (TER) Belection on April 16 Quarterly Report (Q2) Cotober 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Luly 31 Mid-Year Report (Non-election Year Only) (MY) Report for the: Convention (12C) Special (12S) General (30G) Runoff (30R) Report for the: Election on Report for the: Report for fire f		SACRAMENTO		CA 95833 -
4. TYPE OF REPORT (b) Monthly Report (Choose One) (c) Monthly Report (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (O1) (c) 12-Day PRE-Election Report (O2) Quarterly Report (O3) Quarterly Report (O4) Quarterly Report (O5) Quar	2. FEC IDENTIFICATION NUI	MBER ▼ CIT	ΓΥ ▲	STATE ▲ ZIP CODE ▲
(Choose One) (Report Peb 20 (Mz) May 20 (Ms) May 20 (C C00489112			
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July 15 Quarterly Report (Q2) October 15 Quarterly Report (YE) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) General (12G) Report (12G) Report for the: Convention (12C) Special (12S) M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) David Bauer Convention (12C) Special (12S)	July 15	PRE-Election		
January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) POST-Election Report for the: Election on M. M. M. / D. D. / Y.	October 15	Report for the:	Convention (12C)	Special (12S)
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Termination Report (TER) Termination Report (TER) To a special (30G) To a special	January 31			iii dio
Termination Report (TER) Election on Elect	July 31 Mid-Year Report (Non-election	(d) 30-Day POST-Election	X General (30G)	Runoff (30R) Special (30S)
5. Covering Period 10 16 2014 through 11 24 2014 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer David Bauer David Bauer [Electronically Filed] Date 03 20 2015		·		
Type or Print Name of Treasurer David Bauer Signature of Treasurer David Bauer [Electronically Filed] Date 03 20 2015				
Signature of Treasurer David Bauer [Electronically Filed] Date Date David Bauer David Bauer David Bauer David Bauer David Bauer David Bauer	·		my knowledge and belief it is	true, correct and complete.
Signature of Treasurer David Bauer [Electronically Filed] Date 03 20 2015	Type or Print Name of Treasurer	David Bauer		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.	Signature of Treasurer David	Bauer	[Electronically Filed]	
	NOTE: Submission of false, erroned	ous, or incomplete informatio	n may subject the person signing	g this Report to the penalties of 2 U.S.C. §437g.
Office Use Only	Use			

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **JEFF PAC** 10 16 2014 24 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 66304.20 January 1, 2014 (b) Cash on Hand at 137314.27 Beginning of Reporting Period..... 162877.49 2000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 139314.27 229181.69 6(a) and 6(c) for Column B)..... 10209.63 100077.05 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 129104.64 129104.64 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 523.80 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

> Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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			_	_	١,

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	1	
(a) Individuals/Persons Other		
Than Political Committees	2022.22	62300.00
(i) Itemized (use Schedule A)	2000.00	62300.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Lines 11(a)(i) and (ii)▶	2000.00	62300.00
	0.00	0.00
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	30000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	2000.00	92300.00
. Transfers From Affiliated/Other		
Party Committees	0.00	69390.90
All Leans Dessived	0.00	0.00
. All Loans Received	7 7	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	7	3
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	186.59
. Refunds of Contributions Made	7	7 7
to Federal Candidates and Other		
Political Committees	0.00	1000.00
. Other Federal Receipts	7	
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds	7	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(a) Total Transfers (add 19(a) and 19(b))	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Table Book to Assistance and S		
. Total Receipts (add Lines 11(d),	2000 00	160077 40
12, 13, 14, 15, 16, 17, and 18(c))▶	2000.00	162877.49
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	2000.00	162877.49

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: —	Iotal Tillo Fellou	Calellual Teal-10-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(::) N 5 1 101	0.00	1869.96
(ii) Non-Federal Share(b) Other Federal Operating	0.00	1809.90
Expenditures	3209.63	23207.09
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	3209.63	25077.05
Transfers to Affiliated/Other Party		
Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	7000.00	75000.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures	7	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
That I ollida committee		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
-		
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) III anticli Ob and	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	10209.63	100077.05
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	10000 00	0007.00
from Line 31)	10209.63	98207.09

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	2000.00	92300.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2000.00	92300.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	3209.63	23207.09
'. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	186.59
8. Net Operating Expenditures (subtract Line 37 from Line 36)	3209.63	23020.50

1mage# 15951081862 PAGE 6 / 14

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F3XA Transaction ID :

Sch. B line 21b

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOF	R LINE	NU	IMBER	:	PAGE	7	OF	14
Use separate schedule(s)	(che	ck only	or or	ne)					
for each category of the Detailed Summary Page	×	11a		11b		11c	12		
		13		14		15	16		\Box_{17}

or for commercial purposes, other than u	is and Statements may not be sold or used by any persising the name and address of any political committee to	
NAME OF COMMITTEE (In Full) JEFF PAC		
Full Name (Last, First, Middle Initial) . MATCH-E-BE-NASH-SHE-WI	ISH BAND	Date of Receipt
Mailing Address P. O. BOX 218		11 13 / Y = Y = Y = Y
City	State Zip Code	Transaction ID : INCA373
DORR	MI 49323	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer	Occupation	-
SOVEREIGN NATION	INDIAN TRIBE	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) 3.		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing	0	
federal political committee.	C	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	199,09410 1041 10 2410 1	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Foob Persint this Posis
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼		
SUBTOTAL of Receipts This Page (opti	onal)	2000.00
TOTAL This Period (last page this line i	number only)	2000.00

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 8	OF 14
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27	22 23 24 25 28a 28b 28c 29	
Any information conied from such Departs and Chat	omente may not be sald as			
Any information copied from such Reports and Stat or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
│ 〉JEFF PAC				
Full Name (Leat First Middle Initial)				
Full Name (Last, First, Middle Initial) A. DAVID BAUER			Date of Disbursement	
			M M / D D / Y Y Y	Y
Mailing Address 2150 RIVER PLAZA DR. #150			10 16 2014	
City	State Zip Code			
SACRAMENTO	CA 95833		Transaction ID : EXPB367	
Purpose of Disbursement				
ACCOUNTING SVC.		001	Amount of Each Disbursement this	s Period
Candidate Name		Category/	3	300.00
Office Sought: House Disburs	ement For: 2014	Туре		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) B. CHASE CARDMEMBER SERVICE	_C		Date of Disbursement	
B. CHASE CARDMEMBER SERVIC	,E3		M M / D D / Y Y Y	/
Mailing Address P. O. BOX 94014			10 24 2014	
City	State Zip Code			
PALATINE	IL 60094		Transaction ID : EXPB370	
Purpose of Disbursement CREDIT CARD PAYMENT		000	Assessment of Foods Districtions and the	- Destail
Candidate Name		002	Amount of Each Disbursement this	s Period
		Category/ Type	28	378.98
Office Sought: House Disburs	ement For:			
Senate	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. UNITED AIRLINES			Date of Disbursement	
			M M / D D / Y Y Y	Y
Mailing Address AVIATION DR.			10 24 2014	
City	State Zip Code			
STERLING	VA 20166		Transaction ID : EDTB159EXPB	3370
Purpose of Disbursement AIRFARE		000		
Candidate Name		002	Amount of Each Disbursement this	s Period
		Category/ Type	4	176.70
Office Sought: House Disburs	ement For:		[MEMO ITEM]	
Senate	Primary General			
State: President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)			31	78.98
2222 2.000 This i ago (optional)				
TOTAL This Period (last page this line number on	y)			

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SCHEDULE B (FEC Form 3X)	Llos concrete cabadula(a)	FOR LINE	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)	iame and address of any politic	ai committee to	Sonot continuations from Such Committee.
JEFF PAC			
Full Name (Last, First, Middle Initial)			Date of Disbursement
A. BLUE DIAMOND ALMONDS			Date of Dispursement
Mailing Address 1802 C ST.			10 24 2014
City SACRAMENTO	State Zip Code CA 95814		Transaction ID : EDTB160EXPB370
Purpose of Disbursement SNACKS FOR FUNDRAISER		003	Amount of Each Disbursement this Period
Candidate Name		Category/	158.69
Office Sought: House Disbut	sement For:	Туре	
Senate President	Primary General Other (specify)		[MEMO ITEM]
State: District:			
Full Name (Last, First, Middle Initial)			Date of Dishurs-west
B. GALLETTO RISTORANTE			Date of Disbursement
Mailing Address 1101 J ST.			10 24 2014
City MODESTO	State Zip Code CA 95354		Transaction ID : EDTB161EXPB370
Purpose of Disbursement FUNDRAISING EVENT		003	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	884.68
Office Sought: House Disbut Senate President State: District:	sement For: Primary General Other (specify) ▼		[MEMO ITEM]
Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES			Date of Disbursement
Mailing Address SACRAMENTO INT'L AIRPOR	Т		10 24 2014
City SACRAMENTO	State Zip Code CA 95838		Transaction ID : EDTB162EXPB370
Purpose of Disbursement AIRFARE		002	
Candidate Name		Category/ Type	Amount of Each Disbursement this Period 171.10
Office Sought: House Disbut Senate President State: District:	sement For: Primary General Other (specify) ▼	.,,,,,	[MEMO ITEM]
2.5			
SUBTOTAL of Disbursements This Page (optional TOTAL This Period (last page this line number o	<u>·</u>		0.00

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SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER: PAGE 10 OF 14
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Sta	tements may not be sold or use		
or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
│			
Full Name (Last, First, Middle Initial)			
A. UNITED AIRLINES			Date of Disbursement
Mailing Address AVIIATION DD			M M / D D / Y Y Y Y
Mailing Address AVIATION DR.			10 24 2014
City	State Zip Code		Transaction ID : EDTB163EXPB370
STERLING Purpose of Disbursement	VA 20166		Transaction in . EDTB TOSEAT BSTO
AIRFARE		002	Amount of Each Disbursement this Period
Candidate Name		Category/	70.40
		Туре	72.10
Office Sought: House Disbur	sement For: Primary General		[MEMO ITEM]
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)			
B. FRONTIER AIRLINES			Date of Disbursement
Mailing Address 2401 SMITH BLVD.			10 24 2014
City ARLINGTON	State Zip Code VA 22202		Transaction ID : EDTB165EXPB370
Purpose of Disbursement	22202		
AIRFARE		002	Amount of Each Disbursement this Period
Candidate Name		Category/	523.80
Office Sought: House Disbur	sement For:	Туре	[MEMO ITEM]
Senate	Primary General		[MEMOTIEM]
President	Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
C. UNITED AIRLINES			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address AVIATION DR.			10 24 2014
City	State Zip Code		Transaction ID EDTD404EVDD070
STERLING	VA 20166		Transaction ID : EDTB164EXPB370
Purpose of Disbursement AIRFARE		002	Amount of Fools Diskumpersont this Deviced
Candidate Name		Category/	Amount of Each Disbursement this Period
		Type	144.20
Office Sought: House Disbur	sement For: Primary General		[МЕМО ІТЕМ]
President	Primary General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional	l)	······	0.00
TOTAL This Period (last page this line number of	nlv)		
I This I onou (last page this line number of	"J/		

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 11 OF 14
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27		23 24 25 26 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	ie and address of any politic	ai committee to	SUIICIT COUTUBUT	uona nom auch committee.
JEFF PAC				
Full Name (Last, First, Middle Initial)			Data of Diale	
A. UNITED AIRLINES			Date of Disb	pursement
Mailing Address AVIATION DR.			10	24 2014
	State Zip Code		Transactio	n ID : EDTB166EXPB370
STERLING Purpose of Disbursement	VA 20166			
AIRFARE		002	Amount of E	ach Disbursement this Period
Candidate Name		Category/		424.10
Office Sought: House Disburser	nent For:	Туре		
Senate	Primary General		[MEMO ITEN	иј
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) B.			Date of Disb	pursement
			M = M /	D D / Y Y Y Y Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
Candidate Name			Amount of E	ach Disbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disburser	nent For:	71: -	,	,
Senate	Primary General			
State: President District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C.			Date of Disb	pursement
Mailing Address			M = M /	D D / Y Y Y Y Y
City	State Zip Code			
Purpose of Disbursement				
Candidate Name			Amount of E	ach Disbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disburser	nent For:	.,,,,	1	
Senate	Primary General			
State: President	Other (specify) ▼			
Side.				
SUBTOTAL of Disbursements This Page (optional)				0.00
				3178.98
TOTAL This Period (last page this line number only)				3170.80

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 12 C			
TEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orlean orling	1		
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan					
NAME OF COMMITTEE (In Full)					
JEFF PAC					
/ 0211 1710					
Full Name (Last, First, Middle Initial)					
A. JEFF GORELL FOR CONGRESS			Date of Disbursemer	nt	
Mailing Address 2240 F. THOUSAND OAKS BLVD	#200		10 16	2014	
Mailing Address 2219 E. THOUSAND OAKS BLVD	. #209		10 16	2014	
City	State Zip Code		ID EV	VDD005	
THOUSAND OAKS	CA 91362		Transaction ID : EX	XPB365	
Purpose of Disbursement		1			
Candidate Name		011	Amount of Each Disl	bursement this Period	
JEFF GORELL		Category/		2000.00	
	nent For: 2014	Туре			
Senate	Primary Seneral				
President	Other (specify) ▼				
State: CA District: 26					
Full Name (Last, First, Middle Initial)					
B. LEE TERRY FOR CONGRESS			Date of Disbursemen	nt	
			M M / D D	/	
Mailing Address P. O. BOX 540098			10 16	2014	
City	State Zip Code				
OMAHA	NE 68154		Transaction ID : E	XPB366	
Purpose of Disbursement					
Candidate Name		011	Amount of Each Disl	bursement this Period	
LEE TERRY		Category/		3000.00	
	nent For: 2014	Туре			
Senate	Primary Seneral				
President	Other (specify)				
State: NE District: 02					
Full Name (Last, First, Middle Initial)					
CHASE CARDMEMBER SERVICE	S		Date of Disbursemer	nt	
Mailing Address B. O. DOV 04044			10 20	2014	
Mailing Address P. O. BOX 94014			10 20	2014	
City	State Zip Code		Transaction ID - Di	DTD4	
PALATINE	IL 60094		Transaction ID : Pl	ואוע	
Purpose of Disbursement TRAVEL FOR DEMAIO		0.17			
Candidate Name		24Z	Amount of Each Disl	bursement this Period	
CARL DEMAIO		Category/ Type		523.80	
Office Sought: House Disburser	nent For:	Турс	[MEMO ITEM]	7	
Senate	Primary General		[MEMO ITEM]		
President	Other (specify) ▼				
State: CA District: 52					
SUBTOTAL of Disbursements This Page (optional)					
		······································		5000.00	
TOTAL This Period (last page this line number only)				5000.00	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 13 OF 1
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	NOMBER:
	Detailed Guillinary Fage	27	28a 28b 28c 29
Any information copied from such Reports and Stater			
or for commercial purposes, other than using the name	le and address of any politica	di committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
JEFF PAC			
Full Name (Last, First, Middle Initial)			
A. PAUL CHABOT FOR CONGRESS			Date of Disbursement
Mailing Address P. O. BOX 984			10 24 2014
City	State Zip Code		Transaction ID - EVDD260
WILLOWS	CA 95988		Transaction ID : EXPB369
Purpose of Disbursement DEBT RETIREMENT		011	Amount of Each Disbursement this Period
Candidate Name Category/			2000.00
PAUL CHABOT		Type	2000.00
	ment For: 2014 Primary General		
President	Other (specify)		
State: CA District: 31	, , , , , , , , , , , , , , , , , , ,		
Full Name (Last, First, Middle Initial)			
3.			Date of Disbursement
Mailing Address			M M / D D / Y Y Y Y
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disburser	nent For:	Туре	
Office Sought: House Disburser Senate	Primary General		
President	Other (specify)		
State: District:	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
Mailing Address			M = M / D = D / Y = Y = Y
City	State Zip Code		
Only	State Zip Gode		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Office Sought: House Disburser	ment For:	Турс	
Senate	Primary General		
President	Other (specify) ▼		
State: District:			
SUPTOTAL of Dichuranmenta This Boss (anti)			2000.00
SUBTOTAL of Disbursements This Page (optional)		······	10000
TOTAL This Period (last page this line number only)			7000.00

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 14 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

14

AME OF COMMITTEE (In Full) IEFF PAC		
A. Full Name (Last, First, Middle Initial) of Debto	Nature of Debt (Purpose): TRAVEL FOR DEMAIO	
Mailing Address P. O. BOX 94014		
City State PALATINE	Zip Code IL 60094	
Outstanding Balance Beginning This Period 0.00		Transaction ID : PAYD368
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
523.80	0.00	523.80
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		_
City State	Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	_
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
) SUBTOTALS This Period This Page (optional)	>	523.80
TOTALS This Period (last page this line number only)		523.80
) TOTAL OUTSTANDING LOANS from Schedule	0.00	
) ADD 2) and 3) and carry forward to appropriate	523.80	